Real Estate Buyer Client Assessment Form

Personal Details

Full Name	
Farail Address	
Email Address	
Phone Number	
Property Preferences	
Preferred Property Type	
Troising Tropolly Type	_
Minimum Bedrooms	
Minimum Bathrooms	
Preferred Locations	
Budget Range	
Others Desired Freshouse	
Other Desired Features	
Timeline & Financing	
Ideal Move-In Date	
Are you pre-approved for a mortgage?	-1
If yes, name of lender	

Additional Information

Are you selling your current property?	
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Additional Notes	